

CA 04-1417

My Medical Record of Case

2007 OCT 29 PM 3:42

Fri. September 17 ^{9:50} Time 10:00 Jaw was Broken. ^{D'Angelo} From 17 till 20 I was told it ^{cat cause I couldn't} ^{was a directed tooth nurse made} ^{a clinical assessment of my jaw} ^{I ask for ice NO I had to wait until} ^{which there was no pain}

Sat. Sept. 18 didn't ^{chew} I was told couldn't see anyone until Monday

Sun. Sept. 19 Nurse/1. 2. Put ice on it

Mon. Sept. 20 Notify Lt. Quener / Took pictures / Per Doctor / Nurse ^{Set. Fradway C/O Fields Female}

(Jaw) Upon ASSESSMENT Had X-rays taken Conclusion Broken Left Jaw. ^{Also a} ^{liquid diet}

From the 20th of September till to date / NO Action Taken / Iena

Meaning Jaw has not been wired

Sept. 21. Tue 1. Housed in Infirmary By Doctor Diane Hernandez

22. Wed 2. Nurse Iena stated in her own words she ^{did} didn't need oral surgeon to see that my jaw

23. Thu was fractured so she scheduled me to

24. Fri see a outside oral surgeon on the 20th of

25. SAT. Sept. 28. Sat in Infirmary from 20 till 28 ^{Waiting to be seen by Dr. Deameko to him being on vacation I was} ^{told to wait until he's back from vacation}

26. Sun SEPT. 29 Wed.

27. Mon. I was seen by a dentist but he stated it was

28. Tue fractured and if he had permission from Dr. Deameko he would wire my jaw or proper medical equipment he'll wire it but he stated he needs the OK from Dr. Deameko who was still on vacation. I'll remain on liquid diet.

Sept. 30

Fri Oct. 1 I ask EXIA about going to hospital ^{she stated my jaw was broken} ^{earlier I waited of Oct. to hospital} 5. Tue 9. SAT. 13 Weds.

SAT Oct. 2 6. Wed 10. Sun. 14

Sun Oct. 3 7. Thur 11. Mon

Mon Oct. 4 8. Fri 12. Tues

Dr. Fish stated I'm scheduled but can't say when I'll be going out but due to Dr. Deameko coming back from vacation Dr. Fish stated it's up to Dr. Deameko schedule.

Dr. Diane said she can not do another one consultation I was approved to go out it's not longer up to them it's a security issue now I'll have to wait

OCT 15. Ms. Diane ^{Hernandez} ~~said~~ she believes I haven't ~~been~~ ^{truly} getting my Dis.
~~Friday~~ ~~medication~~ ~~refill~~ my medication. I ask Dr. Arambro
 He stated that I was scheduled to be seen Oct. 4 on
 that Monday but through to security I wasn't taken
 out to get my jaw wired.

FIRST ONE THE WEEK OF THE 20th I WAS SCHEDULED TO GO OUT
 SECOND ONE ^{By Jeno Dr.} Consultation was scheduled By Dr Diane Hernandez
~~Next week~~ Dr. Arambro checked with Dr. Diane Hernandez
 and he stated I'll be going out next week he can't
 tell me exact date but in the week of Oct 15 ~~th~~ through

SAT. OCT. 16

SUN. OCT. 17 this day marking 30 days of Having Fractured Jaw and
^{NO medical attention}

MON. OCT 18 I was taken to Christiana Hospital to see Dr. Eugene M. D'Amico. I had a mother
 X-ray taken Filled out papers it was determined it was broken again OCT 18 PM
 I informed Dr. D'Amico about why it took so long to get me to the hospital. He said
 he was never informed or called about my situation I was kept on liquid diet
 and given painkillers per D'Amico and signed papers for surgery and Dr. D'Amico
 said I'll be out for surgery sometime this week.

TUES. OCT. 19

Weds. OCT. 20 Dr. Diane came with Grievens about me receiving medical
 treatment and why it's been so long that I haven't received medical
 treatment I did NOT sign off on Grievens today marking
 30^{day} I've been in the infirmary on liquid diet and have here
 still without medical treatment 30 days

THURS. OCT. 21

10/2/2004 INF

Hunt, Richard
FULL LIQUID
No Snack

THURS OCT. 21 04 9:50 AM

LT. SIKES INFORMED ME THAT I WAS ALLOW TO PRESS
CHARGES IT'S A SOCS (S) SISION AND HE ALSO STATED"
go lay down and rub my GEL MATES FEET or something
STILL HASN'T WENT TO THE HOSPITAL TO GET MY JAW WIRED

FRI. OCT 22.04 around 11:35

I WAS TAKEN FOR SURGERY TO GET MY JAW WIRED
HUT AND I'll receive a follow up in a couple
weeks. I was prescribe telonol 3 with codein every 4h

SAT. OCT 23. I'm receiving my pain meds But not as

SUN. OCT 24. Prescribe when I ask for it I'm being

MON. OCT 25. told to wait "I'm Busy" as you need
Tues. OCT 26. to wait for everyone else so they could
get everyone at the same time.

Wed OCT 27.

THURS. OCT 28. I was told by RN. Jeremy I was weights the 13.12.06
Sept. 04 171 lbs now on Oct 28 my wieght was I weighed
165 lbs.

FRI. OCT 29

SAT. OCT 30

SUN. OCT 31

MON NOV 1. I ASK DR. DIAMIO FOR MEDICAL ATTENTION FOR BRUISES ON MY GUM
HE STATED TO ME TO "FILL OUT A SICK CALL SLIP" WHY IF I'M IN THE INF?

TUES NOV 2 went to see inside dentist about COKE RED GUMS I WAS QWERT MOUTH
WEDS NOV. 3 was told that Diamio was on vacation for 2 weeks I was on the

THURS NOV 4

FRI NOV 12 SAT. NOV 20

FRI NOV 5

SAT NOV 13 Complaining About Pain NO ATTENTION

SAT. NOV 6

SUN NOV 14

SUN NOV 7

MON NOV 15

MON. NOV 8

TUE NOV 16

TUE NOV 9

WED NOV 17

WED. NOV 10

THURS NOV 18

THURS NOV 11

FRI NOV 19

WENT TO DENTIST
OFFICE LOCKS
GOOD FOR
2 WEEKS

weight was 143 lbs.
See ORAL Surgeon Dentist He tighten my GUM
making my GUM hurt plus tooth aches no medicine CHAS

NOV. 21 Sun.

NOV. 22 Mon

NOV. 23 TUES. ^{Seen Dentist complain that ER still receiving toothaches}
From Dentist Tightening Braces said he was going to loosen them

NOV. 24 Wed

NOV. 25 Thurs.

NOV. 26 Friday

NOV. 27 SAT

NOV. 28 SUN.

NOV. 29 Mon ^{seen Dentist} Nothing!!

NOV. 30 TUE

DEC. 1 Wed

DEC. 2 Thurs.

DEC. 3 Friday

DEC. 4 Sat.

DEC. 5 SUN.

DEC. 6 Mon. ^{went to get my mouth wired}
^{supposed to go back and get the whole thing took out}

DEC. 7. TUES.

DEC. 8 Wed.

DEC. 9 Thurs.

DEC. 10 Friday

DEC. 11 SAT.

DEC. 12 SUN

DEC. 13 Mon

DEC. 14 TUES.

DEC. 15 Wed

DEC. 16 Thurs.

DEC 17

DEC. 18

DEC 19

DEC 20

DEC 21

DEC 22

DEC 23

DEC 24

DEC 25

DEC. 26

DEC. 27

DEC. 28

DEC. 29

DEC. 30

DEC 31



HEALTH CARE REQUEST FORM (PETICION PARA TRATAMIENTO MEDICO)

PART A: (To be completed by inmate)
(PARTE A: Completado por preso)

DATE: 9/17/04
(Fecha)

Inmate's Name Richard Hunt **Number:** 274114
(Nombre de preso) (Numero)
Work Assignment: _____ **Work Hours:** _____ **Housing Unit:** 2411
(Trabajo) (Horas de trabajo) (Dorm)
Reason for Medical Appointment: I WAS PUNCHED BY A C/O I THINK MY
(Razon para tratamiento medico) TOOTH IS BROKEN AND PART OF MY TOOTH
IS IN MY GUM
How long have you had this problem? **Hours:** SINCE 10:00 **Days:** 9/17/04
(Cuanto tiempo tienes con este problema?) (Horas) (Dias)

PART B: (To be completed by medical personnel - DO NOT WRITE BELOW THIS LINE)
(Parte B: Completado por personal medico - No escribas debajo de esta linea)

Medical Reply: _____

Medical Staff Member's Signature _____

Date _____

FORM #585

MEDICAL GRIEVANCE

FACILITY: HYCSF
 INMATE'S NAME: Richard Hunt
 HOUSING UNIT: (INF) 205

DATE SUBMITTED: 9-29-04
 SBI#: 274714
 CASE #: _____

SECTION #1

DATE & TIME OF MEDICAL INCIDENT: _____

TYPE OF MEDICAL PROBLEM:

C/O Enig Broke my Jaw of 9-17-04
 I came to the infirmary on 9-20-04 and they X-rayed
 it and it was broken. they let me see the oral surgeon
 on 9-29-04 but they letting my jaw set out of place.
 they said that the doctor wouldn't be back until the
 first week of October.

GRIEVANT'S SIGNATURE: Richard Hunt DATE: 9/29/04

ACTION REQUESTED BY GRIEVANT: I want my jaw fixed.

DATE RECEIVED BY MEDICAL UNIT: _____

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, MEDICAL GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

FORM #585

MEDICAL GRIEVANCE

FACILITY: _____

DATE SUBMITTED: 10.8.04

INMATE'S NAME: Richard C. Hunt

SBI#: 274714

HOUSING UNIT: INF 205

CASE #: _____

SECTION #1

DATE & TIME OF MEDICAL INCIDENT: 10.8.04

TYPE OF MEDICAL PROBLEM:

I need medical attention and I'm not receiving it.
This is violating my Constitutional rights. I'm being
made to suffer for no just reason.

GRIEVANT'S SIGNATURE: Richard C. Hunt

DATE: 10/8/04

ACTION REQUESTED BY GRIEVANT: I request to be taken to a outside
hospital ASAP.

DATE RECEIVED BY MEDICAL UNIT: _____

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, MEDICAL GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

Multi-Purpose Criminal Justice Facility
Inter-Dept. Memo

TO: Richard Hunt Inf.

FROM: Sgt. M. Moody, Inmate Grievance Chair

DATE: 10-19-04

RE: MEDICAL GRIEVANCE # 04-7735

Please be advised that your medical grievance has been received in the office of the Grievance Chair. In accordance with the Inmate Grievance Procedure 4.4, it has been forwarded to the Medical Department for processing.

If no one contacts you for an informal resolution or if your grievance can not be resolved informally, you will automatically be scheduled for a grievance hearing before the Medical Grievance Committee (MGC). Please keep in mind your grievance is only one of numerous others received in this office on a daily basis. Thank you for your patience.

HRYCI Howard R. Young Correctional Institution
 1301 E. 12th Street
 WILMINGTON DE, 19809
 Phone No. 302-429-7700

Date: 01/19/2005

GRIEVANCE REPORT

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : HRYCI
Grievance # : 7735	Grievance Date : 10/08/2004	Category : Individual
Status : Unresolved	Resolution Status :	Resol. Date :
Grievance Type: Health Issue (Medical)	Incident Date : 10/08/2004	Incident Time :
IGC : Moody, Mary	Housing Location : Building 1, West, Floor 1, Pod 1E, Cell 6, Bed A	

OFFENDER GRIEVANCE DETAILS

Description of Complaint: I need medical attention and I'm not receiving it. This is violating my constitutional rights I'm being made to suffer for no just reason.

Remedy Requested : I request to be taken to a outside hospital asap.

INDIVIDUALS INVOLVED

Type	SBI #	Name

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance : YES	Date Received by Medical Unit : 10/15/2004
Investigation Sent : 10/15/2004	Investigation Sent To : Fish, Irwin
Grievance Amount :	

1301 E. 12th Street
WILMINGTON DE, 19809
Phone No. 302-429-7700

INFORMAL RESOLUTION

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : HRYCI
Grievance # : 7735	Grievance Date : 10/08/2004	Category : Individual
Status : Unresolved	Resolution Status:	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 10/08/2004	Incident Time :
IGC : Moody, Mary	Housing Location : Building 1, West, Floor 1, Pod 1E, Cell 6, Bed A	

INFORMAL RESOLUTION

Investigator Name : Fish, Irwin **Date of Report :** 10/15/2004

Investigation Report : Hernandez// I/M was seen by the oral surgeon on two occasions and still refuses to sign off on the grievance.

Reason for Referring:

Offender's Signature: _____

Date : _____

Witness (Officer) : _____

HR/CI Howard R. Young Correctional Institution
 1301 E. 12th Street
 WILMINGTON DE, 19809
 Phone No. 302-429-7700

Date: 01/19/2005

GRIEVANCE INFORMATION - MGC

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : HRYCI
Grievance # : 7735	Grievance Date : 10/08/2004	Category : Individual
Status : Unresolved	Resolution Status:	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 10/08/2004	Incident Time :
IGC : Moody, Mary	Housing Location : Building 1, West, Floor 1, Pod 1E, Cell 6, Bed A	

MGC

Date Received : 10/25/2004

Date of Recommendation: 01/18/2005

GRIEVANCE COMMITTEE MEMBERS

Person Type	SBI #	Name	Vote
Staff		Fish, Irwin	
Staff		Jovin, Jeremy	
Staff		Kerkula, Barnabas	
Staff		Breton, Monique	Deny
Staff		Cerisier, Danivia	Deny
Staff		Gallier, Denise	Deny
Staff		Harris, Diane	Deny

VOTE COUNT

Uphold : 0

Deny : 4

Abstain : 0

TIE BREAKER

Person Type	SBI #	Name	Vote
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RECOMMENDATION

10-26-04 Medical Grievance Committee Hearing

*Note Rose Swift, Delaware Technical & Community College Student Nurse Present. I/M Hunt did not object to her presence.

This grievance will be rescheduled. Mr. Fish and Jeremy Jovin, RN treated I/M Hunt. Therefore, in accordance with the Inmate Grievance Procedure 4.4., cannot have a part in the resolution of this grievance.

MGC re-convened 1-18-05

The Committee recommends that the grievance be denied. Proper treatment has been provided. Oral Surgeon, Dr. D'Amico has discharged I/M Hunt from his care. Also note that I/M Hunt said that he did not want to sign-off on the grievance because he is pursuing other things.

I/M Hunt wants to appeal.

1301 E. 12th Street
WILMINGTON DE, 19809
Phone No. 302-429-7700

GRIEVANCE INFORMATION - Appeal

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : HRYCI
Grievance # : 7735	Grievance Date : 10/08/2004	Category : Individual
Status : Unresolved	Resolution Status :	Inmate Status :
Grievance Type : Health Issue (Medical)	Incident Date : 10/08/2004	Incident Time :
IGC : Moody, Mary	Housing Location : Building 1, West, Floor 1, Pod 1E, Cell 6, Bed A	

APPEAL REQUEST

Appeal submitted by Richard Hunt, 274714-dated 1-20-05 Due to the lengthy unreasonable delay, that stopped me from receiving medical treatment. I refuse to sign off because I want to be informed what exactly was a specific reason for the delay. In order for me to be aware of what I need to do to prevent the same thing for happening in the future. If and when I may need emergency medical treatment. Richard Hunt

REMEDY REQUEST

DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904

April 14, 2005

Inmate HUNT RICHARD C
SBI # 00274714
HRYCI Howard R. Young Correctional Institution
WILMINGTON DE, 19809

Dear RICHARD HUNT:

We have reviewed your Grievance Case # 7735 dated 10/08/2004.

Based upon the documentation presented for our review, we deny your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Paul W. Howard
Bureau Chief

DCC Delaware Correctional Center

Date: 07/06/2006

Smyrna Landing Road

SMYRNA DE, 19977

Phone No. 302-653-9261

GRIEVANCE REPORT**OFFENDER GRIEVANCE INFORMATION**

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : DCC
Grievance # : 50865	Grievance Date : 06/08/2006	Category : Individual
Status : Unresolved	Resolution Status :	Resol. Date :
Grievance Type: Health Issue (Medical)	Incident Date : 06/08/2006	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg 23, Lower, Tier A, Cell 2, Bottom	

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Inmate claims: I'm having problems with my jaw that was broken before. It showed no signs of current injury on x-ray but I'm still having great pain in the area. I was charged \$4. for a reoccurring problem. Also there's no paper showing that I received any injury at all in my file. I would like something to be done about this.

Remedy Requested : I would like for my Jaw to be looked at. Also want to know why I was charged for a reoccurring problem and to know also why there's no medical information on my broken jaw or treatment?

INDIVIDUALS INVOLVED

Type	SBI #	Name

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance : YES	Date Received by Medical Unit : 07/06/2006
Investigation Sent : 07/06/2006	Investigation Sent To : Rodweller, Deborah
Grievance Amount :	

INFORMAL RESOLUTION

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : DCC
Grievance # : 50865	Grievance Date : 06/08/2006	Category : Individual
Status : Unresolved	Resolution Status:	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 06/08/2006	Incident Time :
IGC : Merson, Lise M	Housing Location :Bldg 23, Lower, Tier A, Cell 2, Bottom	

INFORMAL RESOLUTION

Investigator Name : Rodweller, Deborah	Date of Report 07/06/2006
Investigation Report :	
Reason for Referring:	

Offender's Signature: _____

Date : _____

Witness (Officer) : _____

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 09/29/2006

GRIEVANCE INFORMATION - MGC**OFFENDER GRIEVANCE INFORMATION**

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : DCC
Grievance # : 50865	Grievance Date : 06/08/2006	Category : Individual
Status : Unresolved	Resolution Status :	Inmate Status :
Grievance Type : Health Issue (Medical)	Incident Date : 06/08/2006	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg C, Tier C, Cell R7, Top	

MGC

Date Received : 09/14/2006

Date of Recommendation: 09/29/2006

GRIEVANCE COMMITTEE MEMBERS

Person Type	SBI #	Name	Vote
Staff		Eller, Gail	Deny
Staff		Branch, Adriene	Deny
Staff		Heddinger, Brenda	Deny
Staff		McCreanor, Michael	Abstain

VOTE COUNT

Uphold : 0

Deny : 3

Abstain : 1

TIE BREAKER

Person Type	SBI #	Name	Vote
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RECOMMENDATION

Hearing Held 9/28/2006.

Deny: Put in sick call if jaw continues to cause discomfort.

Inmate verbally informed of MGC Decision and appeal form was supplied.

Appeal due 10/5/2006.

GRIEVANCE INFORMATION - Appeal

OFFENDER GRIEVANCE INFORMATION

Offender Name : HUNT, RICHARD C	SBI# : 00274714	Institution : DCC
Grievance # : 50865	Grievance Date : 06/08/2006	Category : Individual
Status : Unresolved	Resolution Status :	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 06/08/2006	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg C, Tier C, Cell R7, Top	

APPEAL REQUEST

Appeal arrived 10/9/2006. Appeal accepted, Cpl Merson did not collect grievances/appeals due to being out on leave. Appeal states: I was told to just put in another sick call form for the same reoccurring problem with my jaw. There wasn't anything stating that my jaw was even broken in my file. I haven't still gotten any answer on that matter! I feel it's not right to keep charging me for the same issues I have been dealing with for the past 2 yrs. I'm beening told Howard Young Correctional hasn't sent my medical file here, but I have been here in DCC since Feb 23. 05. I feels though I should have to file another sick call or be charged for the same problem over and over. If I need to show my own medical paper I will upon request.

REMEDY REQUEST

**DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904**

~~March 13, 2007~~
~~December 29, 2006~~

D/w, C-26

**Inmate HUNT RICHARD C
SBI # 00274714
DCC Delaware Correctional Center
SMYRNA DE, 19977**

Dear RICHARD HUNT:

We have reviewed your Grievance Case # 50865 dated 06/08/2006.

Based upon the documentation presented for our review, we deny your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

**Richard Kearney
Bureau Chief**



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
HOWARD R. YOUNG CORRECTIONAL INSTITUTION
1301 EAST 12TH STREET
WILMINGTON, DELAWARE 19809
Telephone: (302) 429-7747
Fax: (302) 429-7716

Raphael Williams
Warden IV

MEMORANDUM

TO: Richard Hunt, 274714
Infirmary

FROM: Warden Raphael Williams *RW*

DATE: October 20, 2004

SUBJ: **YOUR RECENT CORRESPONDENCE**

Your recent correspondence, to this office, has been forwarded to Captain Carol Jefferson for any action or response deemed appropriate; however, recreation occurs has staffing permits.

RW:ad

DISTRIBUTION

Captain Carol Jefferson
File

EX A, B,

FORM #584

GRIEVANCE FORM

FACILITY: D.C.CDATE: April 20. 05GRIEVANT'S NAME: Richard HuntSBI#: 274714

CASE#:

TIME OF INCIDENT: 8:20 pmHOUSING UNIT: (19) D-W3

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED. IN THE INCIDENT OR ANY WITNESSES.

This is the second grievance I have put in concerning my paper work that's been taken away from me. I haven't heard anything about the first one that was filed February 30. 05 7 days after I was transferred from Howard Young Correctional Facility. Hendricks v Coughlin 114 F.3d 390 2nd Cir. Grievance clearly protected by federal Constitution. This is my second grievance on this issues of staff (D.C.C) losing documents paper work that would help my case. The first grievance was never heard. This undermines proceedings which violates my due process to a proper hearing for staff to lose paper work would be unduly prejudice the state is not capable of impartially investigating itself.

ACTION REQUESTED BY GRIEVANT:

I would like this situation dealt within a professional manner.

GRIEVANT'S SIGNATURE: Richard HuntDATE: 4/20/05

WAS AN INFORMAL RESOLUTION ACCEPTED?

☐ (YES)☐ (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

April '97 REV

RICHARD Hunt
274714 UNIT 19 AL#4

WARE CORRECTIONAL CENTER
DDOCK ROAD
LA, DELAWARE 19977

LEGAL MAIL



Office of the Clerk
United States District Court
544 N. KING STREET Lockbox 18
Wilmington, DELAWARE
19801-3510

LEGAL MAIL